

Division of Corporations

Page 1 of 2

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Florida Department of State

Division of Corporations

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Katherine Harris, Secretary of State

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To: Division of Corporations
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From: Account Name : MEDGUARD SERVICES INC.
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

Villa Berta

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

H99000021559 2

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:
Villa Berta, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
231 East 59th Street
Hialeah, FL 33013

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
The number share with this corporation shall have the authority to issue is 100 shares of common stock No par Value. Each share shall have equal rights with each other share with respect to dividendes voting and in liquidation.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
Leonor Angelica Perez
4445 E 4th Avenue
Hialeah, FL 33127

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:
Leonor A. Perez-President
4445 E 4th Avenue
Hialeah, FL 33127
Maria Elena Van Sickle-Secretary
Treasurer
715 South Shore Drive
Miami Beach, FL 33141

Maria Elena Van Sickle
Signature/Incorporator

Date

8/27/99

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the duties of my position as registered agent

Leonor A. Perez
Signature/Registered Agent

Medguard Services
9274 SW 40 St
Miami, FL 33165
Gilbert Sanabria

Date

8-27-99

H99000021559 2